

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	merom		03-13-01
O.I.P.E. CLASSIFIER		59	4/5/1
FORMALITY REVIEW	MD	579	5/14/01
RESPONSE FORMALITY REVIEW	TAP	1110	5-21-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral) ... Canceled A ..... Appeal  
 - ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	03-13-01
2	/
3	/
4	/
5	/
6	✓
7	✓
8	/
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12	✓
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15	✓
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18	✓
19	✓
20	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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573  
06-29-01